

LOUISIANA LEGISLATURE
Income Disclosure Form
Calendar Year 2003
(Pursuant to R.S. 42:1114.1)

NAME: Geymann, Brett F.

2004-548

Legislative District:
House District No. 35

INSTRUCTIONS

1. If you do not have income to report, complete items 1 and 2(a) and (b) or 3(a) and (b), and sign below.
2. Complete 2(a) and (b) or 3(a) and (b) whether or not income is reported.
3. If you have income to report, complete this form with respect to income received during the previous calendar year.

Income exceeding \$250.00 received by a member, a member's spouse, or a business enterprise in which the member or the member's spouse owns at least 10% must be reported if received from any of the following:

A. Income received directly from the state, or local political subdivisions of the state.
Complete items 2(a) and (b) or 3(a) and (b) and Attachment A to report income received directly from the state or local political subdivisions of the state, and sign below.
Income from service in the legislature, salary from full time employment of a member's spouse, salary of a member's spouse when such spouse is an elected official, and benefits from a statewide public retirement system are excluded and should not be reported.

B. Income received for services performed for or in connection with a gaming interest.
Complete items 2(a) and (b) or 3(a) and (b) and Attachment B to report income which was received for services performed for or in connection with a gaming interest, and sign below.

4. This form must be signed by the legislator and filed with the Secretary or Clerk by July 1.

5. Transmit original either to:

Louisiana Senate
Office of the Secretary
P. O. Box 44183
Baton Rouge, LA 70804

OR

Louisiana House of Representatives
Office of the Clerk
P. O. Box 44281
Baton Rouge, LA 70804

1. ☐ Neither I, my spouse, nor any business enterprise in which I or my spouse have a 10% interest or greater has received income in excess of \$250.00 from the state of Louisiana or any local governmental entity or political subdivision thereof, or from services performed for or in connection with a gaming interest.
(Complete items 2(a) and (b) or 3(a) and (b) and sign below)

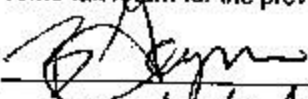
2. ☒ (a) I certify that I have filed my federal income tax return for the previous year.
☒ (b) I certify that I have filed my state income tax return for the previous year.

OR

3. ☐ (a) I certify that I have filed for an extension of my federal income tax return for the previous year.
☐ (b) I certify that I have filed for an extension of my state income tax return for the previous year.

SIGNATURE:

DATE:


6/10/04

RECEIVED
JUN 10 2004

House of Representatives
Clerk's Office

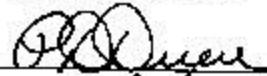
PREPARED BY:

Glenn Kepp, Secretary of the Senate
and
Alfred W. Speer, Clerk of the House

FOR OFFICE USE ONLY

Received by:

Date:


6/10/04

2040077

Income Received For Services Performed For Or In Connection With A Gaming Interest

Each gaming interest from which income has been received should be listed separately. Also, income which may be received from the same or different gaming interests, but which was payable to different income sources (e.g., two different corporations) should be listed separately.

If additional space is necessary, make copies of this attachment.

☒ I, my spouse, or a business enterprise in which I or my spouse have a 10% interest or greater have received income which is directly or indirectly related to services performed for or in connection with a gaming interest.

(1) RECEIVED FROM:

Isle of Capri GENE KYLE INC. \$3446.06
 (Name of gaming interest) Income Received

(2) RECEIVED BY:

BUSINESS ENTERPRISE (OUTFITTERS INC.)
 (Self; Spouse; Business Enterprise in which self or spouse has ten percent (10%) ownership.)

(3) If (2) above is a business enterprise, interest in said enterprise of 10% or greater is owned by:

Check one

☐ Self (or asset of community property regime)

☐ Spouse (separate property)

☒ Jointly, with spouse

Outfitters Ink

P.O. Box 685

Lake Charles, LA 70602

Phone 337-436-9722

Fax 337-436-9723

Invoice

Date	Invoice #
7/16/2003	02-1294

PAID

Bill To

Isle of Capri Casino
523 MILLER AVENUE
WESTLAKE, LA 70669

P.O. Number

00039190

Terms

Rep

Ship

7/16/2003

Via

Hand Delivered

Quantity

Item Code

Description

Price Each

Amount

120 022

Imprinted Apparel- sm. - xl - one color full front

2.53

303.60

45 022

Imprinted Apparel- 2x - one color full front

4.16

187.20

45 022

Imprinted Apparel- 3x - one color full front

4.54

204.30

34 022

Imprinted Apparel- 4x - one color full front

4.92

167.28

non-taxable sales to wholesalers

0.00%

0.00

Total

\$862.38

Outfitters Ink

P.O. Box 685

Lake Charles, LA 70602

Phone 337-436-9722

Fax 337-436-9723

Invoice

Date	Invoice #
9/12/2003	02-1345

PAID

BILL To

Isle of Capri Casino
523 MILLER AVENUE
WESTLAKE, LA 70669

P.O. Number

Terms

Rep

Ship

Via

00040957

9/12/2003

Hand Delivered

Quantity	Item Code	Description	Price Each	Amount
40	022	Imprinted Apparel - One color full front - purple print non-taxable sales to wholesalers	2.53 0.00%	101.20 0.00
Total				\$101.20